FORM D PROCESSED

SEP 182008

THOMSON REUTERS

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB APPROVAL
OMB Number: 3235-0076
Expires: Sept. 30,2008
Estimated average burden
hours per response.....16.00

SEC USE ONLY							
Prefix		Serial					
DATE RECEIVED							

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	Mall Processing
EDvantage LLC 2008 Offering Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	
Type of Filing:	
	400 J 9 8000
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	୍ର ପ୍ରକଳ
Edvantage LLC	TOD
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
402 Birchfield Drive, Mount Laurel, New Jersey 08054	1-800-423-5513
Address of Principal Business Operations (Number and St cet, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Provides billing, reporting, collection and support services to education institutions relating to notes or other similar documents	student retail installment agreements, installme
Type of Business Organization	lana maifili
B	lease specify):
	ty company
Month Year Actual or Estimated Date of Incorporation or Organization: OTT OTS Actual Estin Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 17d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering, and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given by which it is due, on the date it was mailed by United States registered or certified mail to that address.	A notice is deemed filed with the U.S. Securities elow or, if received at that address after the date on
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20:	549.
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually photocopies of the manually signed copy or bear typed or printed signatures.	
Information Required: A new filing must contain all information requested. Amendments need only report thereto, the information requested in Part C, and any material changes from the information previously suppled not be filed with the SEC.	rt the name of the issuer and offering, any changes fied in Parts A and B. Part E and the Appendix need
Filing Fee: There is no federal filing fee.	
State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for some uLOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Sare to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for accompany this form. This notice shall be filed in the appropriate states in accordance with state law, this notice and must be completed.	Securities Administrator in each state where sales r the exemption, a fee in the proper amount shall
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal exappropriate federal notice will not result in a loss of an available state exemption unle filing of a federal notice.	xemption. Conversely, failure to file the ess such exemption is predictated on the

THE REPORT OF THE PERSON OF TH		A BASIC ID	ENTIFICATION DATA	Mary Carlot	Mary September 2000 Carl St. of the last
2. Enter the information re	quested for the fo				<u></u>
 Each promoter of t 	he issuer, if the is	suer has been organized v	within the past five years;		
 Each beneficial ow 	ner having the pow	ver to vote or dispose, or d	irect the vote or disposition	of, 10% or more of	f a class of equity securities of the issuer.
 Each executive off 	icer and director o	of corporate issuers and of	f corporate general and ma	naging partners of	partnership issuers; and
Each general and n	nanaging partner o	of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	✓ Director	General and/or Managing Partner
Full Name (Last name first, i Timothy Tantillo	f individual)				
Business or Residence Addre 402 Birchfield Drive, Mou	*	Street, City, State, Zip C Jersey 08054	ode)	· · · · · · · · · · · · · · · · · · ·	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i Dennis Murphy	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	ode)		
402 Birchfield Drive, Mour	at Laurel, New J	lersey 08054			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)	-	
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
	(Use bla	ank sheet, or copy and us	e additional copies of this	sheet, as necessary)

2/3/	建設			В. П	NFORMAT	ON ABOU	T OFFERI	NG .		4 4 4 4 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
1. Has th	e issuer sold	d or does th	ne issuer ir	ntend to se	il to non-s	ccredited i	nvestors in	this offeri	ino?		Yes	No
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.									L			
2. What is the minimum investment that will be accepted from any individual?									s 50,	00.00		
									Yes	No		
	_	permit joint										
commi If a per or state	ission or sim rson to be lis es, list the na	tion request ilar remune sted is an ass ame of the b you may s	ration for s sociated pe roker or de	olicitation rson or ago aler. If mo	of purchase int of a brok irc than five	ers in conne er or deale (5) persor	ection with r registered as to be list	sales of sec I with the S ed are asso	urities in t EC and/or	he offering with a state	E	
Full Name	(Last name	first, if indi	vidual)				·					
Business or	Residence	Address (N	umber and	i Street, Ci	ity, State, Z	ip Code)			··· - -			
Name of A	ssociated Br	roker or De	aler									
		Listed Has							· ·			
(Chect	c "All States	s" or check	individual	States)		••••••	*************				All	l States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Full Name	(Last name	first, if indi	vidual)		· ·		·					
Business of	r Residence	: Address (1	Vumber an	d Street, C	ity, State, 2	Zip Code)						
Name of A	ssociated Br	roker or De	aler				····					
States in W	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Chec	c "All States	s" or check	individual	States)	*************	**************************************		***************	**!}*******		AI	States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name	(Last name	first, if indi	ividual)									
Business of	r Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Name of A	ssociated Bi	roker or De	aler		- <u></u> -							
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Chec	k "All State:	s" or check	individual	States)					***************	*************	. [A]	I States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Type of Security Offering Price Sold s 0.00 0.00 Debt 0.00 ☐ Common ☐ Preferred 0.00 0.00 Other (Specify Illic membership interests) \$\,\ \\$400,000.00 400,000.00 \$_400,000.00 400,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number of Purchases Investors s 100,000.00 300,000.00 Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Sold Security Type of Offering Regulation A \$ 0.00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 0.00 Transfer Agent's Fees 0.00 Printing and Engraving Costs.... 25,000.00 Legal Fees.....

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Accounting Fees

Engineering Fees

Sales Commissions (specify finders' fees separately).....

Total

Other Expenses (identify) ____

0.00

0.00

\$ 0.00

25,000.00

S

	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."			s
	Indicate below the amount of the adjusted gross pro- each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	[\$ 0.00	<u>\$ 0.00</u>
	Purchase of real estate			s_0.00
	Durchage cental or lessing and installation of mag	hinery		\$0.00
	and equipment	****		s
	Construction or leasing of plant buildings and fac		_] \$	- U
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ete or cecurities of another	7\$ 0.00	ss
	Repayment of indebtedness] \$ 0.00	S 0.00
	Working capital		7\$ 0.00	s 375,000.0
	Other (specify):		\$ 0.00	□ s 0.00
			\$_0.00	ss
	Column Totals		\$ <u>0.00</u>	S 375,000.0
	Total Payments Listed (column totals added)	\$ <u>375,000.00</u>		
	TO SHEET THE PARTY OF THE PARTY	D. FEDERAL SIGNATURE		CONTRACTOR PROPERTY.
٠.	sissuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	e undersigned duly authorized person. If this notice	is filed under Rision, upon writt	ule 505, the followi
S	uer (Print or Type)	Signature	Date 9/. /	^
Ec	vantage LLC	Jy Just	9/10/0	<u>r</u>
a	ne of Signer (Print or Type)	Title of Signer (Print or Type)		
	othy Tantillo	Manager		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)